

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 12 | 8/15 |
| FORMALITY REVIEW | SL | 1021 | 09/10/01 |
| RESPONSE FORMALITY REVIEW | MTB | 954 | 11/20/01 |

INDEX OF CLAIMS

✓ Rejected
= Allowed
- (Through numeral)..... Canceled
÷ Restricted
N Non-elected
I Interference
A Appeal
O Objected

| Claim | | Date | |
|-------|----------|------|---|
| Final | Original | | |
| 1 | 2 | ✓ | ✓ |
| 3 | ✓ | ✓ | ✓ |
| 4 | ✓ | ✓ | ✓ |
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| Claim | | Date | |
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If more than 150 claims or 10 actions
staple additional sheet here

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